



## DIVISION OF POSTSECONDARY SCHOOL AUTHORIZATION COMPLAINT FORM

Please clearly print the information requested below.

Name of Complainant: \_\_\_\_\_ Date Submitted \_\_\_\_\_

Residence Address: \_\_\_\_\_  
(Number & Street, City, State, and Zip)

Phone Number: \_\_\_\_\_ E-Mail Address: \_\_\_\_\_  
(If Applicable)

Name of Institution: \_\_\_\_\_  
(Full Name)

Institution's Address : \_\_\_\_\_  
(Clearly Print Number & Street, City, State, and Zip)

Complainant  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

1. This complaint form should only be used to file a complaint against institutions authorized by the Tennessee Higher Education Commission and regulated by the Division of Postsecondary School Authorization.
2. To verify if an institution is authorized by the Tennessee Higher Education Commission and regulated by the Division of Postsecondary School Authorization, please review the official [list of authorized institutions](http://www.state.tn.us/thec/) on the Tennessee Higher Education Commission website or contact the Postsecondary School Authorization staff at 615-741-5293. The Commission's website is located at: <http://www.state.tn.us/thec/>
3. Please attach a statement describing the nature of the complaint. The statement should include a description of the events or circumstances upon which the complaint is based and all supporting documentation for your complaint must be attached. All complaints will be retained by the Division of Postsecondary School Authorization for two years from the date they are submitted.

For Office Use Only	
Received	Investigator

### MAIL OR FAX ALL COMPLAINTS TO THE FOLLOWING:

Tennessee Higher Education Commission  
Division of Postsecondary School Authorization  
Parkway Towers, Suite 1900  
404 James Robertson Parkway  
Nashville, TN 37243-0830  
Attention: Complaints

Telephone: (615) 741-5293  
Fax: (615) 532-8845